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					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must				
25263	C					iling or transmission.	,		
HOUSTON ELISEEVA LLP 4 MILITIA DRIVE SUITE 4					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
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APPLICATION NO.	PPLICATION NO. FILING DATE		FIRST NAMED INVENT	OR	ATTO	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
09/648,263 08/25/2000		Jeffrey A. Korn			1002-0003 4695				
TITLE OF INVENTION:	OPTICAL CHANNEL	MONITORING SYSTE	M WITH SIMULTANE	COUS C-BAND	AND L-BA	ND DETECTION			
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAI	D ISSUE FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO-YES	\$1440 \$720	\$0		\$0	\$1440-\$72	0 -	01/22/2008	
EXAMI	NER	ART UNIT	CLASS-SUBCLASS						
LEE, JOHN R		2878	250-227230						
PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AN	ndence address (or Chail 122) attached. attached. attached or "Fee Address' or more recent) attach	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. HE PATENT (print or type) Lata will appear on the patent. If an assignee is identified below, the document has been filed for							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Axsun Technologies, Inc. Billerica MA									
Please check the appropriate assignee category or categories (will not be printed on the patent):									
la. The following fee(s) ar Issue Fee Publication Fee (No	small entity discount p	b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 504102 (enclose an extra copy of this form).							
. Change in Entity Statu			☐ h Applicant is no l	onger claiming	SMALL EN	ΓΙΤΥ status. See 37 CI	R 1 27	(a)(2)	
NOTE: The Issue Fee and nterest as shown by the re	Publication Fee (if requ	nired) will not be accepted	d from anyone other tha						
Authorized Signature /grant houston/			Date January 10, 2008						
Typed or printed name _ J. Grant Houston			Registration No. 35,900						
This collection of informat in application. Confidentia ubmitting the completed his form and/or suggestio 30x 1450, Alexandria, Vir Alexandria, Virginia 2231	J-14JU.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR Concersions are required to res						,	